

**MULTIPLE PENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/06425

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2	1		1			
3		2		1		
4		2		1		
5		2		1		
6		2		1		
7		2		1		
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18		2		1		
19	1					
20	1					
21	1					
22	1					
23	1					
24	1					
25		2		1		
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34		2		1		
35	1		1	2		
36	1		1			
37	1		1			
38	1		1			
39		2		1		
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41		2		1		
42		2		1		
43		2		1		
44		2		2		
45		2		2		
46	1					
47		1				
48		2				
49		2				
50	1		1			
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1					
52		1				
53	1	1		1		
54		1				
55	1					
56		1				
57				1		
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97						
98						
99						
100						
TOTAL IND.	15		9			
TOTAL DEP.	46		32			
TOTAL CLAIMS	61		41			

*Laurel*